

CLAIMS	<small>SERIAL NO.</small>	<small>FILING DATE</small>
<small>APPLICANT(S)</small>		

CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3		2		1		
4		1		1		
5		1		1		
6		1		1		
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TOTAL IND.		1		1		1
TOTAL DEP.		6		6		6
TOTAL CLAIMS		7		7		7

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS